

RELATED PERSON APPLICATION FORM

Make sure that you have a relationship with our Company before transmitting your personal data in this application form to NICE AND GLAM TEKSTİL MOBİLYA SANAYİ VE TİCARET ANONİM ŞİRKETİ "Company".

A. Contact Information:

Name and Surname	
ID Number	
Phone number	
E-mail address	
Address	

B. Please indicate your relationship with our Company. (Customer, business partner, service provider, etc.)

- Customer
 Consultant
 Service Provider
 Partner
 Other (Explain)

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C. Please specify your request under the Personal Data Protection Law in detail:

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D. Please choose the method of notifying you of our response to your application:

- I want it sent to my address. (Also, if it requires cost, it will be reflected to you in accordance with the legislation.)
- I want it sent to my e-mail address. (We will be able to respond to you faster if you choose the e-mail method.)
- I want to receive it by hand. (In case of receipt by proxy, a notarized power of attorney or authorization document is required.)

This application form has been prepared in order to determine your relationship with our Company and to fully determine your personal data, if any, and to respond to your relevant application in a correct and legal time. In order to eliminate the legal risks that may arise from illegal and unfair data sharing and to ensure the security of your personal data, our Company reserves the right to request additional documents and information (copy of identity card or driver's license, etc.) for identification and authorization. In the event that the information regarding your requests you submit within the scope of the form is not correct and up-to-date, or an unauthorized application is made, our Company does not accept any liability for such false information or requests arising from unauthorized applications. If it is determined that you do not have a relationship with our company, your information in the application form will be destroyed and recorded.

Relevant Person

Name Surname :	
Application date:	
Signature :	